



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 2402

SERIAL NUMBER 10/751,549	FILING DATE 01/05/2004 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 816020-100070US
-----------------------------	---------------------------------------	--------------	------------------------	---

APPLICANTS

Keith Myers, Lake Forest, CA;
 Christine Nguyen, Garden Grove, CA;

** CONTINUING DATA *****

This application is a DIV of 09/772,526 01/29/2001 PAT 6,682,559
 which claims benefit of 60/178,333 01/27/2000 *IB*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** *IB*
 ** 04/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
---	---------------------------	-------------------------	-----------------------	----------------------------

35 USC 119 (a-d) conditions met
☐ yes ☒ no ☐ Met after

Verified and Acknowledged
 Examiner's Signature *[Signature]* Initials *IB*

ADDRESS
 34026
 JONES DAY
 555 WEST FIFTH STREET, SUITE 4600
 LOS ANGELES, CA
 90013-1025

TITLE
 Prosthetic heart value

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
------------	---	--

<p>RECEIVED 385</p>		<table border="1"> <tr> <td data-bbox="1029 134 1471 191"> <input type="checkbox"/> 1.18 Fees (Issue) </td> </tr> <tr> <td data-bbox="1029 191 1471 247"> <input type="checkbox"/> Other _____ </td> </tr> <tr> <td data-bbox="1029 247 1471 296"> <input type="checkbox"/> Credit </td> </tr> </table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> 1.18 Fees (Issue)					
<input type="checkbox"/> Other _____					
<input type="checkbox"/> Credit					